



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)

## BIB DATA SHEET

CONFIRMATION NO. 7327

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/591,203	06/22/2007 RULE	424	1645	235.0155 0101

## APPLICANTS

Robert J. Maier, Athens, GA;  
 John S. Gunn, Powell, OH;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/US2005/006638 02/28/2005  
 which claims benefit of 60/549,306 03/02/2004  
 and claims benefit of 60/604,846 08/26/2004

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \* SMALL ENTITY \*\*  
 12/10/2008

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance /SD/ Initials	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No		GA	4	17 <input checked="" type="checkbox"/> 3	3

## ADDRESS

MUETING, RAASCH & GEBHARDT, P.A.  
 P.O. BOX 581336  
 MINNEAPOLIS, MN 55458-1336  
 UNITED STATES

## TITLE

Hydrogenase deficient bacterial strains

<b>FILING FEE RECEIVED</b> 475	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit